## **Application to Appear Pro Hac Vice**

Court	of Appe	als No.				
Name:				_ Pho	Phone:	
Firm/Office:				Fax:		
Street Address:				E-mail:		
City:			State	e:	Zip:	
Name o	of party	/parties	to be represented:			
standin States ( Court o	ng issue Court of of Appe	d within f Appea als Non	R. 46-1(d), this application must be accome the previous six months from the highest ls, (2) proof of service, and (3) a check in Appropriated Fund, 11th Circuit."  If any answer is yes, attach a statement g	court (	of any state or another United nount of \$50 made payable to "U.S.	
ILS	NO					
		1.	Have you changed your name or been k than the one appearing on this application		by any names or surnames other	
		2a.	Have you been disbarred or suspended to department, bureau or commission of ar received a reprimand from any of them practice?	from particular properties from the properties from the properties from the properties from the properties from the proper	e or the United States, or have you	
		2b. 3a.	Are any such proceedings or allegations Have you been a party to criminal proce allegations of fraud, misrepresentation of you?	edings	s, or to civil proceedings in which	
		3b. 4.	Are you presently under investigation for Have you previously applied to this couproceeding? If so, when?	rt for p	oro hac vice admission in any	
OATH	I (OR A	FFIRM	IATION)			
Constitution application and true and t	tution o ation to d correc	f the Un appear pat to the	, do solemnly swear elor of this court, uprightly and according ited States. I do further swear (or affirm) oro hac vice, including attachments which best of my knowledge, information and be	that al are inc elief.	I statements and responses in my corporated herein by reference, are	
			ey's Social Security No. (for positive ident			

**NOTE:** This application accompanied by all required items noted above should be forwarded to: Clerk, U.S. Court of Appeals, Eleventh Circuit, 56 Forsyth Street, N.W., Atlanta, GA 30303.

Rev.: 1/07